

09-26-05

AT/16/14


PTO/SB/21 (09-04)

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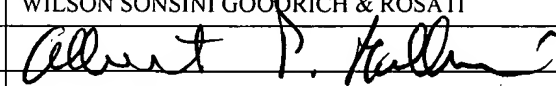
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 TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/426,792	
	Filing Date	October 22, 1999	
	First Named Inventor	Dennis T. Mangano	
	Art Unit	1614	
	Examiner Name	Phyllis G. Spivack	
Total Number of Pages in This Submission	2	Attorney Docket Number	27116-701.301

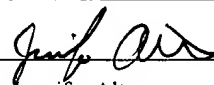
ENCLOSURES (Check all that apply)

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Remarks 		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

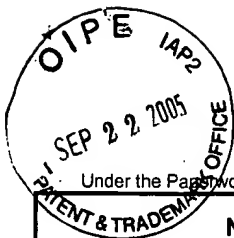
Firm Name	WILSON SONSINI GOODRICH & ROSATI		
Signature			
Printed Name	Albert Halluin		
Date	September 22, 2005	Reg. No.	25,227

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Jennifer Altman	Date	September 22, 2005

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PTO/SB/31 (04-05)

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**NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**Docket Number (Optional)
27116-701.301

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On September 22, 2005.

Signature

Typed or printed
name Jennifer AltmanIn re Application of
Dennis T. ManganoApplication Number
09/426,792Filed
October 22, 1999For: Methods for Reducing Mortality and Morbidity by Postoperative Administration of a Pharmacologic Cardiovascular AgentArt Unit
1614Examiner
Phyllis G. SpivackApplicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$500.00☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:\$250.00☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.☒ The director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 23-2415. I have enclosed a duplicate copy of this sheet.☐ Petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

☐ applicant/inventor.☐ assignee of record of the entire interest.See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96).☒ attorney or agent of record.Registration Number 25,227.☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____

Signature

Albert Halluin

Typed or printed name

(650) 565-3585

Telephone number

September 22, 2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of one form is submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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